

MARICOPA REGIONAL CONTINUUM OF CARE

GAPS

ANALYSIS

DECEMBER 2025



TABLE OF CONTENTS

SECTION I — EXECUTIVE SUMMARY	3
SECTION II — PURPOSE, SCOPE, AND APPROACH	5
SECTION III — REGIONAL SYSTEM OVERVIEW	7
SECTION IV — QUANTITATIVE DATA SNAPSHOT	9
SECTION V — QUALITATIVE INSIGHTS FROM LISTENING & STORY-SHARING CIRCLES	18
SECTION VI — IDENTIFIED SYSTEM GAPS	22
SECTION VII — RECOMMENDATIONS	26
SECTION VIII — FUTURE DIRECTION AND PRIORITIES FOR 2026 AND BEYOND	31

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SECTION I - EXECUTIVE SUMMARY

The Maricopa Regional Continuum of Care (CoC) is undertaking this gaps analysis on an accelerated timeline, system performance patterns, and the early qualitative wisdom shared by the Lived Experience Collaborative (LEC), the Community Voices Group, and the Youth Action Board (YAB). This document invites thoughts towards future strategic planning and systems modeling. Even within this condensed timeframe, the patterns that surfaced reflect consistent and long-standing systemwide dynamics that warrant attention and coordinated action.

Across the available data, a picture of steady and unrelenting system pressure comes into view. Monthly inflow into homelessness has remained consistent for nearly a decade, with little variation from 2018 through 2025. While the system successfully moves hundreds of people into positive exits each month, those outflow numbers have remained largely unchanged over the same period, even as demand continues to increase. The number of people exiting the system into “inactive” status remains significantly higher than the number of people exiting into housing. This gap, between what the system can sustainably offer and what the region consistently needs, creates a form of saturation that impacts every part of the homelessness system service landscape.

Within this operational picture, the lived experience voices brought forward critical and valuable insight into how the homelessness response system feels to navigate. The listening circles consistently described homelessness as a state of constant work: managing safety, documentation, appointments, rules, transportation, and uncertainty. Participants across all three listening and story-sharing circles emphasized that communication delays, inconsistent expectations across providers, limited handoffs between programs, and repeated requests for the same information all create real emotional and logistical strain. People shared that the smallest breakdowns; one missing referral, one unanswered call, one unclear next step can send an entire housing plan back to the beginning.

Across the quantitative and qualitative data, several themes rise to the surface:

- **Persistent Inflow**
Newly unhoused numbers remain steady each month, keeping sustained pressure at the system’s front door.
- **Outflow Limitations**
Positive exits remain stable but insufficient to balance inflow, contributing to bottlenecks.
- **Inactive Exits**
A significant number of people fall out of contact with the system each month, before reaching a housing outcome.
- **Longer Stays for Certain Household Types**
Older adults, households including people with disabilities, and those affected by domestic violence experience longer periods of homelessness and higher rates of returning after housing.
- **Navigation Challenges**
Individuals and youth described difficulty accessing services, repeating their stories, and

managing documentation requirements across multiple providers.

- **Differences in Service Experiences**

Participants described varying rules, expectations, and communication practices across agencies, which contribute to confusion and delays.

Despite these challenges, the region's approach has been shaped by evidence-informed practices, including minimizing barriers to housing access and pairing housing with voluntary, supportive services. These practices have contributed to positive outcomes across the CoC. Looking ahead, there is opportunity to continue refining these approaches in ways that align with emerging federal priorities around treatment, recovery, and public safety coordination. Wisdom shared by people with lived experience underscores that stability, supportive services, and strong post-housing connections are key to helping individuals remain housed and move toward recovery and well-being.

As the Maricopa Regional CoC looks ahead to deeper system work in 2026, this gaps analysis helps lay the groundwork for a planning approach that begins with shared outcomes for the entire system, while allowing flexibility in how those outcomes are achieved. This means identifying universal goals that reflect what success should look like for everyone served by the system, such as reducing the length of time people experience homelessness, increasing successful exits to permanent housing, and decreasing returns to homelessness, and then designing strategies that respond to the different ways households move through the system, recognizing that distinct household types and service pathways may require tailored supports to reach those shared goals.

Alongside this, the region can continue building on the Human-Centered Community Design¹ methods used during this gaps analysis. This approach centers the direct experiences of people who interact with the homelessness response system, positioning lived experience not only as testimony, but as a guide for crafting clearer pathways, reducing administrative burden, strengthening communication, and improving the consistency of service experiences across providers.

Together, the data and the stories converge on a central insight: the system is operating with commitment and consistency, but it is under significant strain. The pressures of steady inflow, limited outflow growth, and high inactive exits intersect with the realities that people describe in their day-to-day experiences. This gaps analysis is therefore both a reflection of the system's current state and an invitation to shape what comes next, a homelessness response system that is responsive, coordinated, grounded in evidence, and informed by the people who rely on it.

¹Human-Centered Community Design is a collaborative problem-solving method that centers the experiences, knowledge, and insights of the people who interact directly with a system. It emphasizes co-design, rapid prototyping, and iterative refinement to create solutions that are grounded in lived experience. IDEO. "The Field Guide to Human-Centered Design." IDEO.org, 2015.

Section II — Purpose, Scope, and Approach

The purpose of this gaps analysis is to provide a clear, descriptive snapshot of the current conditions, pressures, and operational realities shaping the Maricopa Regional Continuum of Care's homelessness response system. Conducted on an accelerated timeline, this analysis does not claim to be exhaustive, instead, it is intended to surface the most consistent patterns emerging from quantitative data, system flow metrics, and the early qualitative insights shared directly by people with lived experience. It is a foundation, one that will guide deeper planning, co-design, and system strengthening in 2026.

PURPOSE OF THE ANALYSIS

The analysis aims to illuminate where the system is strained, where processes create delays or confusion, and where clearer pathways can support movement toward housing more effectively. It draws upon multiple sources of information to illuminate how the system is functioning today, and where adjustments or new strategies may be needed to meet the region's goals of reducing and ending homelessness, strengthening stability, and improving the pathways that link people to housing.

The analysis focuses on the parts of the system that are within the CoC's influence: service access points, program rules, transitions between interventions, communication practices, documentation requirements, performance patterns, and the experience of navigating the system from crisis to housing.

SCOPE AND LIMITATIONS

Because this effort was completed within a tight timeline, the scope is intentionally focused. The analysis includes:

- Quantitative data trends from HMIS, Stella M and Stella P metrics, and system flow dashboards.
- System performance indicators such as inflow, outflow, returns, and lengths of time homeless.
- Synthesis of listening and story-sharing circles with the Lived Experience Collaborative, the Community Voices Group, and the Youth Action Board.
- Review of service experiences described by people interacting with shelters, housing programs, outreach, and Coordinated Entry.

This analysis does not include:

- Detailed examination of every individual provider, program, or funding stream.
- Stakeholder interviews with all CoC member agencies or leadership.
- Cost modeling, fiscal analysis, or budget projections.
- Provider-specific performance reviews.

Given the compressed timeframe, this analysis does not examine every provider, program, or policy,

nor does it include listening circles with all CoC leaders, providers, and community partners. The work therefore prioritizes the most consistent and observable systemwide patterns.

APPROACH TO THE ANALYSIS

The approach combined data, experience, and design principles:

- **Quantitative Review**
The analysis examined long-term trends across inflow, outflow, inactive exits, returns to homelessness, length of time homeless, and household composition. These metrics provide a factual picture of the system's capacity and movement over time.
- **Qualitative Listening and Story-Sharing Circles**
Participants from the Community Voices Group, LEC, and YAB offered insight into the day-to-day realities that the numbers cannot capture. Their reflections helped illuminate the processes, rules, and interactions that shape people's experiences of accessing shelter, services, and housing.
- **Service-Experience Mapping**
Themes from multiple listening and story-sharing circles were compared to identify similarities across age groups, programs, and types of experience, particularly around communication delays, documentation burdens, lack of clarity, inconsistent expectations, and the emotional labor of navigating homelessness.
- **Alignment with Evidence-Informed Housing Practices**
The analysis maintained a focus on low-barrier access, stabilization supports, and housing as the foundation for recovery and long-term well-being. This approach—emphasizing rapid connection to permanent housing, voluntary engagement with services, and client-centered support—has served as the foundation of the Maricopa Regional Continuum of Care's strategy for nearly two decades. The gaps analysis is informed by the impact this framework has had on system outcomes during that period, while also acknowledging evolving federal guidance around treatment access and public safety alignment.

Section III — Regional System Overview

Compared to many Continuums of Care, the Maricopa Regional Continuum of Care operates at a larger scale and with greater regional complexity, spanning a geographically expansive area with diverse jurisdictions, service providers, and community needs. Understanding the landscape in which this system operates is essential to interpreting the patterns that emerge in the data and the lived experience insights shared throughout this gaps analysis.

OVERVIEW OF SYSTEM COMPONENTS

The regional homelessness response system includes a broad set of programs and interventions designed to meet households at various points in their housing crisis:

- **Emergency Shelter and Overflow Spaces**
The primary entry point for many individuals and families seeking immediate safety.
- **Transitional Housing**
Structured, time-limited housing paired with services, particularly for households exiting crisis situations or requiring intensive support.
- **Rapid Re-Housing (RRH)**
Short- to medium-term rental assistance and case management intended to help households quickly stabilize in permanent housing.
- **Permanent Supportive Housing (PSH)**
Long-term housing with supportive services for individuals and households with high service needs or long histories of homelessness.
- **Street Outreach**
Engagement with people living unsheltered, often serving as the first connection to services and housing pathways.
- **Coordinated Entry (CE)**
The region's process for standardized assessment and referral to housing programs.
- **Treatment and Recovery Services**
Behavioral health, mental health, and substance use treatment access points, an area of increasing importance under emerging federal priorities.
- **Prevention and Diversion**
Supports intended to reduce inflow by helping people maintain housing or identify immediate alternatives to shelter.

Together, these components form the backbone of the CoC's operational structure. Each is interconnected, meaning delays or constraints in one part of the system often create ripple effects across the rest.

REGIONAL CONDITIONS IMPACTING THE SYSTEM

The homelessness response system operates within a local context shaped by:

- **Geographic Scale**
The size and spread of Maricopa County affect outreach coverage, coordination, and transportation access for households seeking help.
- **Environmental Extremes**
High temperatures and seasonal weather conditions create urgency for shelter access and complicate unsheltered living situations.
- **Housing Market Pressures**
Rising rents and limited vacancy rates increase both inflow pressure and the challenge of securing permanent housing placements.
- **Growth in Older-Adult Homelessness**
Data shows a rising number of older adults entering or returning to homelessness, often with mobility, medical, or fixed-income challenges.
- **Varied Local Practices**
Rules, expectations, and administrative requirements differ across programs and funders, contributing to the navigation challenges consistently identified in listening and story-sharing circles.
- **Federal Policy**
Federal policy now emphasizes greater coordination between law enforcement and homeless assistance programs, creating new expectations for partnerships across housing providers, behavioral health systems, and public safety entities.

These external and internal conditions create a landscape where many households experience long waits, multiple assessments, or repeated attempts to connect with services. They also shape the operational pressures visible in inflow, outflow, and performance metrics.

Section IV — Quantitative Data Snapshot

This section provides a summary of quantitative patterns drawn from system flow² data, HMIS trends, and Stella P analytics. The graphs referenced in this section are taken directly from the quantitative dataset provided by the Maricopa Regional Continuum of Care. They highlight consistent trends in inflow, outflow, household composition, length of time unhoused, returns to homelessness, and placement patterns across housing interventions.

INFLOW TRENDS

Maricopa County Inflow Gap Analysis

Yellow: Newly unhoused households

Orange: Households that have returned (to homelessness) from housing

Red: Households that have returned to active homelessness after previously being marked as “inactive”

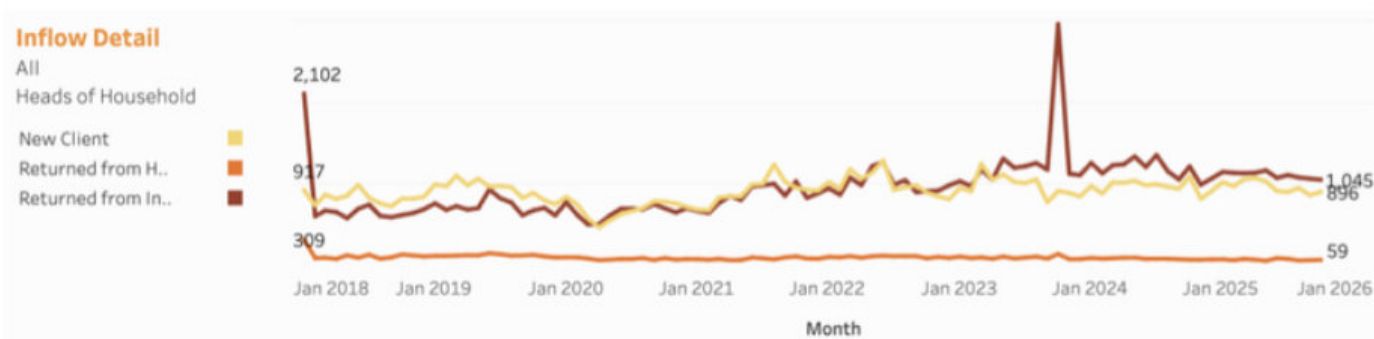


Figure 1. Maricopa County Inflow Gap Analysis

Source: Maricopa System Flow Dashboard

This Inflow Gap Analysis Graph shows the number of individuals becoming newly homeless each month in Maricopa County remained relatively constant from 2018 to 2025. In Jan. 2018, 917 people became newly unhoused in Maricopa County, compared to 896 people in Jan. 2025, indicating continued, regular demand for entry-level housing crisis responses. It is important to consider this trend because this steady inflow rate will keep pressure on entry points to the homeless response system.

The number of individuals returning to homelessness after being designated as “inactive” has steadily increased since 2018, with a high of about 1,249 individuals falling into this category in Aug. 2023. Even after a data cleanup due to a revision to Maricopa County’s inactive policy (which increased this measure temporarily to nearly 3,000 clients in Oct. 2023), the number of individuals returning to

² System flow analyses examine patterns of inflow, outflow, returns, and movement through interventions to assess the capacity and functioning of homelessness response systems. HUD. “System Performance Measures.” HUD Exchange. <https://www.hudexchange.info/programs/coc/system-performance-measures/>

inactive remained at pre-Oct 2023 levels, (1,117 individuals in Nov. 2023 and 1,251 in Jan. 2024). This measure holds steady at ~1,000 individuals per month in recent months (1,045 people in Oct. 2025).

The number of individuals who return to homelessness after previously being housed decreased in late 2025 but has had similar rates since 2018. In Aug. 2025, 52 individuals returned to homelessness from housing, in Sept. 2025, 55 returned from housing, and in Oct. 2025, 59 individuals returned from housing. Compared to early 2018, monthly returns to homelessness were lower during this period, with between 70 and 100 individuals returning each month (81 people returned to homelessness in February 2018). Together, these patterns illustrate consistent inflow pressure, steady returns from inactive status, and a stable low number of individuals returning from housing.

OUTFLOW TRENDS

Maricopa County Outflow Gap Analysis

Light blue line: Total number of clients who moved into permanent housing within the reporting month.
Dark blue line: The number of clients who become “inactive” over the course of the reporting month.

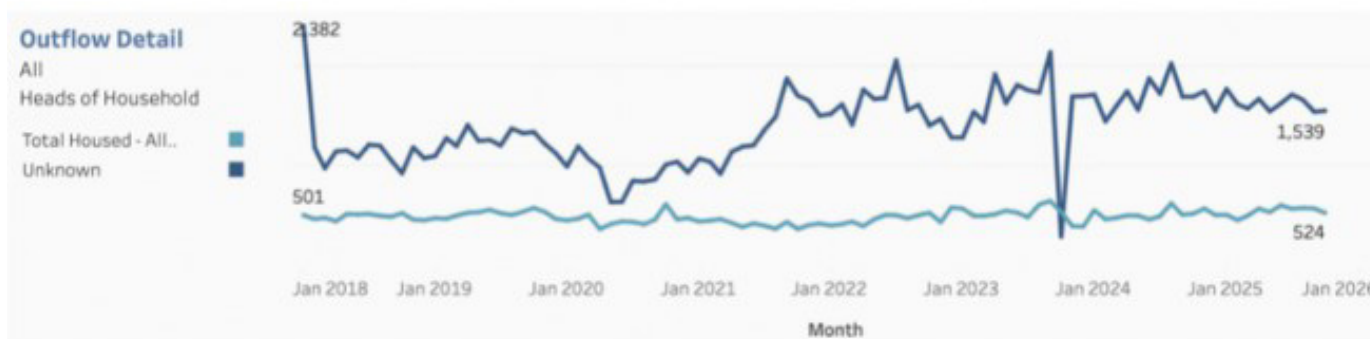


Figure 2. Maricopa County Outflow Gap Analysis
 Source: Maricopa System Flow Dashboard

This Outflow Gaps Analysis Graph compares exits to permanent housing and exits to inactive status. The blue line graph compares two types of “outflow” out of the Maricopa County homelessness response system: individuals who had positive exits and individuals who were designated as inactive during the reporting month.

The monthly rate of people who were permanently housed in Maricopa has remained relatively similar since 2018 with little overall variation. This figure has risen from Jan. 2018 (501) to 524 individuals in October 2025. This reflects Maricopa’s capacity to consistently house hundreds of households, while also highlighting the challenge of scaling that capacity to meet the full level of unmet need.

The rates of individuals who become inactive during the course of the reporting month has settled between approximately 1,000 and 1,500 individuals for the last several years. While there was a temporary sharp decrease in the rates of outflow to inactivity in Oct. 2023, due to the data policy

change, the rates have bounced back to pre 2023 levels. These numbers indicate that demand for housing services consistently exceeds the system’s capacity to provide timely follow-up and support for current and prospective clients. These patterns indicate that the number of individuals exiting to inactive status consistently outpaces the number of those moving into permanent housing each month.

COMPOSITION OF THE ACTIVELY HOMELESS POPULATION

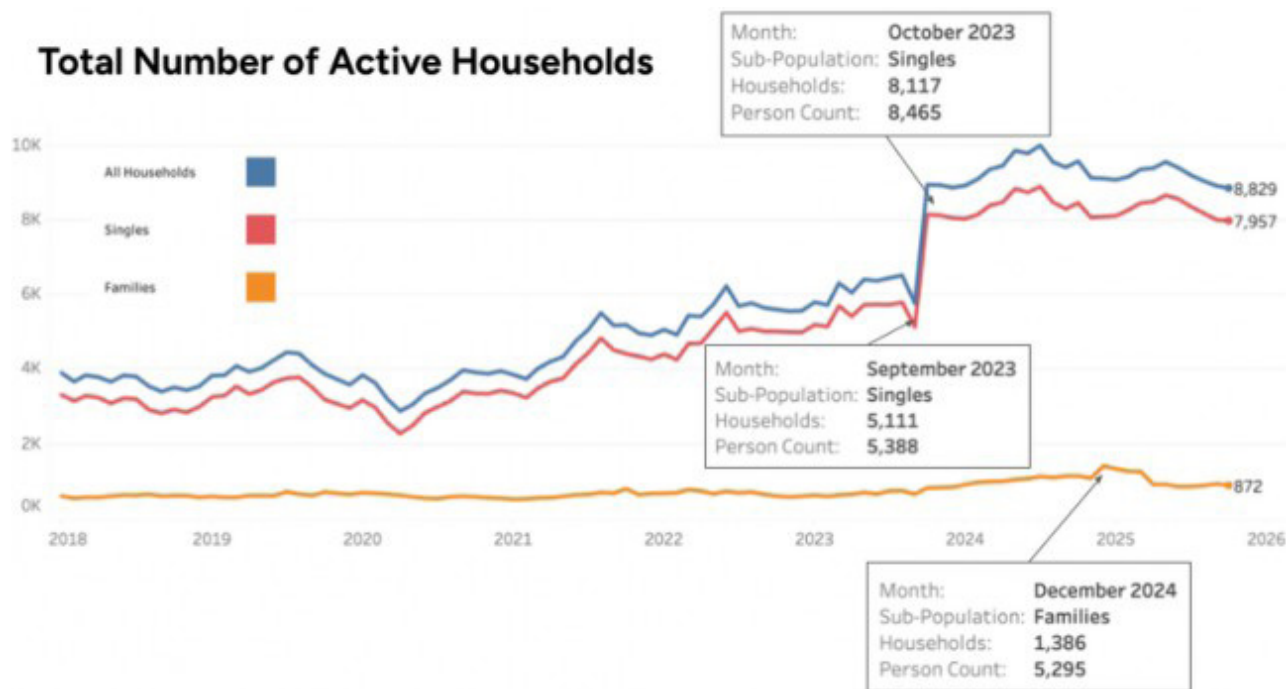


Figure 3. Total Number of Active Households
Source: Maricopa System Flow Dashboard

October 2023: Increase In # of Actively Unhoused Individuals

The number of unhoused single households in Maricopa County increased by 57%. This occurred following a data cleanup caused by a change to the CoC’s inactive policy, which revised the threshold for “inactivity” to 90 days (instead of 30 days), which is when individuals are moved “off the active list”. Before the policy change, there were 5,388 people counted as experiencing homelessness (Sept. 2023). Following the policy change, 8,465 people were counted as actively homeless (Oct. 2023).

This Total Number of Active Households Graph shows:

- Singles Comprise the Bulk of Households and Growth**
 Single individuals represent about 90% of all unhoused households in Oct. 2025 (7,957 of 8,829 households are singles).
- Families are a Relatively Small Proportion of Unhoused Households**
 The number of unhoused family households remains around 850–900 households throughout

2025, representing only ~10% of the total population of actively unhoused households. The widening gap between singles and families suggests that homelessness among family households is not increasing at the same pace as it is for the single population, even as overall system activity rises. The highest count of unhoused families occurred in Dec. 2024, with unhoused 1,386 family households. In October 2025, which is when the most recent data was reported as of the time of this analysis, this number had decreased to 872 family households.

Number of Active Households by Sub-Population

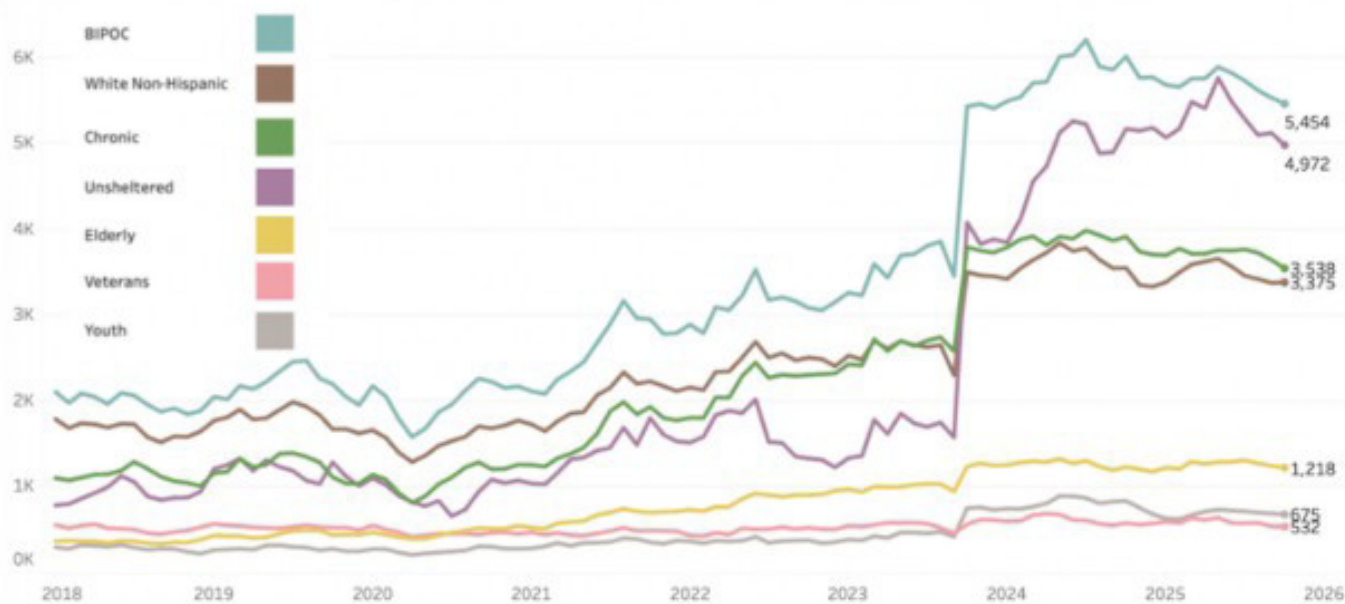


Figure 4. Number of Active Households by Sub-Population
Source: Maricopa System Flow Dashboard

- **Post-2023 Increase Across All Subpopulations**

Because households may be represented in more than one category, the figures below reflect overlapping subpopulations rather than distinct counts. Within this context, all subpopulations show a clear increase beginning in 2021 and continuing into late 2025, resulting in a combined total of 19,764 active households by October 2025 (the final data point on this graph). Within this overall trend, the number of unhoused BIPOC (Black, Indigenous, and People of Color) and unsheltered households shows a decline from May 2025 through October 2025.

This graph displays broader subpopulation patterns:

- **Rate of Unhoused BIPOC Households is Greater than the White/Non-Hispanic Rate**

In Oct. 2025, 3,375 households identified as White/Non-Hispanic, representing only 17% of Maricopa County’s actively homeless population. In contrast, 5,454 households identifying as Black, Indigenous, and/or People of Color were unhoused the same month, accounting for 27.6% of the total unhoused active population.

- **Unsheltered and Chronic Groups Represent a Large Share of Actively Homeless**

In October 2025, Maricopa County had 4,972 households that were unhoused and unsheltered, representing about 25% of all active households experiencing homelessness. During the same

month, 3,538 households were experiencing chronic homelessness, accounting for 18% of all active households. While these groups may overlap, together they represent a substantial share of the population served—approximately 43% of all active households, highlighting the need for focused strategies to better respond to the needs of these more vulnerable households.

- **Elderly, Veterans, and Youth Experience Homelessness at Lower Rates**

Elderly households experiencing homelessness in Maricopa County totaled 1,218 households or 6% of the total actively homeless population (Oct. 2025). This rate of elderly unhoused households is higher than in years past, but still higher than current rates of homelessness among other subpopulation groups. Veterans represented 675 households (3.4%), and there were 532 unhoused youth households (2.7%) in Oct. 2025. Together, these households comprise only 6.1% of actively unhoused households, suggesting that these groups may benefit from targeted, specialized interventions rather than broad population-level strategies.

LENGTH OF TIME UNHOUSED

Average Number of Days Unhoused by Subpopulation

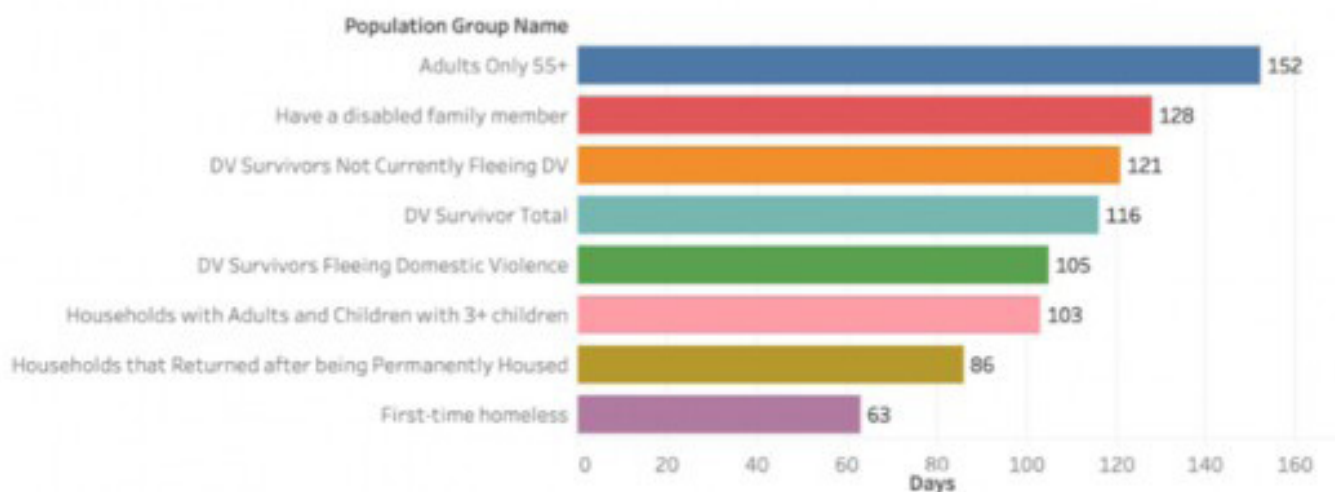


Figure 5. Average Number of Days Unhoused by Subpopulation
 Source: LOT Unhoused in CoC Programs from Stella P

This Average Number of Days Unhoused by Subpopulation Graph demonstrates longer episodes concentrated among older adults (55+) and households with disabilities. Households with adults over the age of 55 were unhoused an average of 152 days, and households with disabled family members were unhoused for an average of 128 days. These vulnerable groups experience homelessness for an average of 4–6 months before becoming housed.

There are three domestic violence-related subpopulations displayed in this chart — DV survivors, DV survivors not currently fleeing domestic violence, and DV survivors fleeing domestic violence. These groups of DV survivors experience sustained housing instability — DV survivors in general averaging 116 days unhoused, while those currently fleeing domestic violence had the shortest Length of Time (LOT) unhoused, 105 days. When compared to the “first-time homeless” group, DV survivors’ length of

time rates are higher, showing that DV-affected households face substantially longer episodes than newcomers to the homeless response system.

Families and households that become unhoused after being permanently housed overall have shorter average episodes of homelessness, but still exceed first-time stays. Households with three or more children average 103 days and households that returned after being permanently housed average 86 days, suggesting that family episodes are shorter than those for older adults or disabled households but remain longer than first-time stays.

Self-Reported Average Number of Days Unhoused by Subpopulation

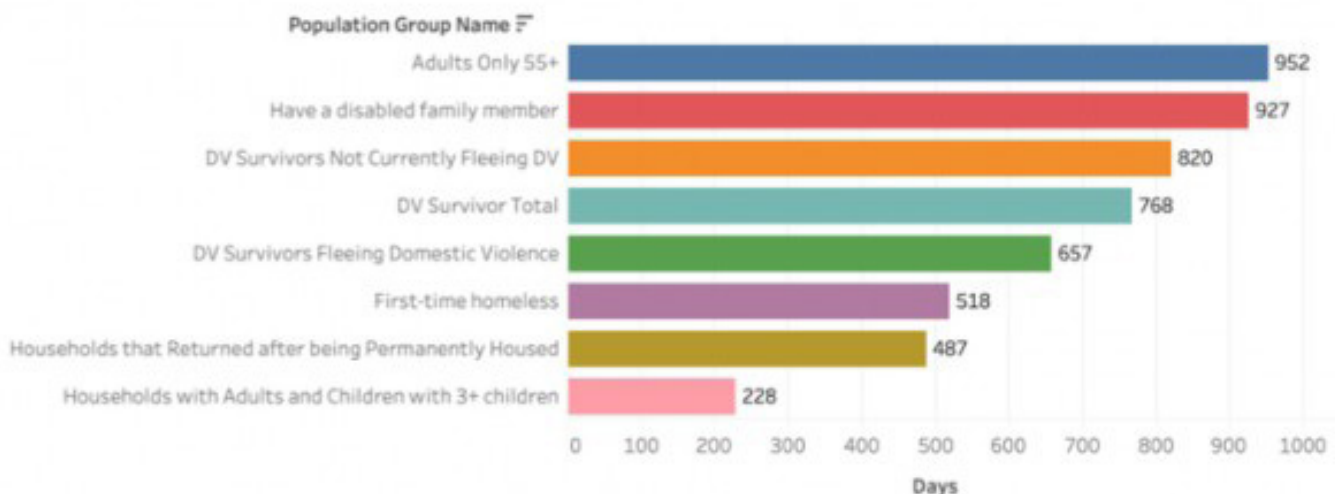


Figure 6. Self-Reported Average Number of Days Unhoused by Subpopulation
 Source: Self-Reported LOT Unhoused from Stella P

This Self-Reported Average Number of Days Unhoused by Subpopulation graph shows the average number of days different populations were unhoused, according to self-reported information. These averages are sometimes years long and can be indicative of the households’ unhoused experience, in terms of access to the system and connections to service needs.

Longer unhoused episodes are concentrated among older adults and households with disabilities. Adults-only households aged 55 or more report the longest average unhoused period at 952 days, and households with a disabled family member report 927 days.

Domestic violence survivors experience extended unhoused periods. DV survivors who are not currently fleeing DV have the longest average unhoused period of 820 days, DV survivors in general averaged 768 days unhoused, and those currently fleeing DV had the lowest length of time unhoused, at 657 days.

Households experiencing homelessness for the first time self-reported an average of 518 days unhoused, and households returning to the homeless response system after being housed were unhoused for an average of 487 days.

Households with 3 or more children report the shortest average unhoused episodes (228 days). This figure is a fraction of the LOT unhoused for Adults 55+ and individuals with disabled family

members, suggesting that this group is having a drastically different experience than the highest-ranking groups, and may have different concrete housing and service needs, and a different way of connecting to resources.

RETURNS TO HOMELESSNESS

Returns to Unhoused from Permanent Housing Destinations

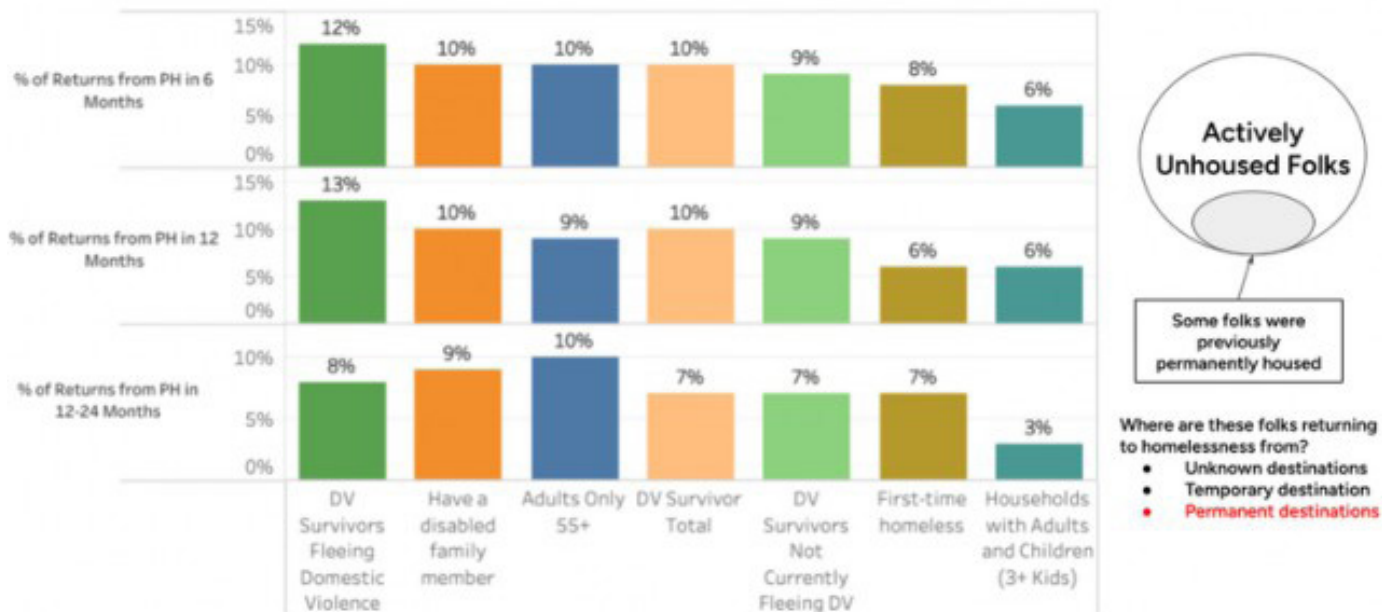


Figure 7. Returns to Unhoused from Permanent Housing Destinations
Source: Stella P

This Returns to Unhoused from Permanent Housing Destinations Graph shows that returns to homelessness from permanent housing destinations after being previously housed are concentrated among older adults and households with disabilities. These groups have the highest rates of returns to being unhoused within the first 6 months after placement into permanent housing, (10% rate for each population.) This indicates that the transition period immediately after move-in is a critical risk window for these groups.

Domestic violence survivors exhibit some of the highest return rates for this group within 6 months of being permanently housed (12%), and DV survivors returned within 12 months at a rate of 13%. These data suggest that for DV survivors, trauma-informed supports and housing stability interventions need to extend well beyond initial housing placement, with a goal of increased housing stability rates.

Households with children and first-time homeless individuals have lower short-term return rates within the first 6 months of being permanently housed, (6% and 8% return rates, respectively).

Returns to Unhoused from Unknown Destinations

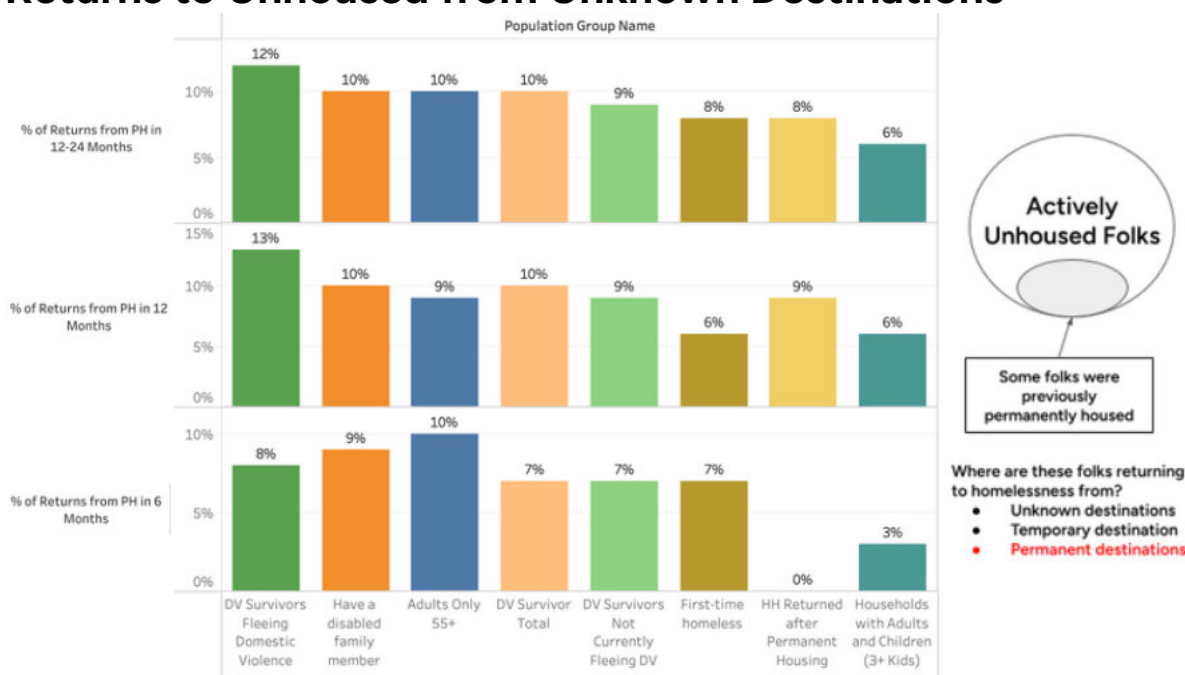


Figure 8. Returns to Unhoused from Unknown Destinations
Source: Stella P

The Returns to Unhoused from Unknown Destinations Graph shows older adults and households with disabilities face the highest return rates from unknown destinations. Adults age 55 and up and households with a disabled family member both represent 35%–34% returning to homelessness from unknown destinations, among the highest across all groups.

Domestic violence survivors show elevated risk of returning to homelessness from unknown destinations, when compared to other groups. DV survivors not currently fleeing violence have a return rate of 36% for households returning within 12–24 months. DV survivors currently fleeing show slightly lower rates (27% within 6 months, 32% within 12–24 months).

Families with multiple children have the lowest rates of return to homelessness from unknown exit destinations. This group has a return rate of 14% within 6 months from the exit, and 8% after 12–24 months. This may indicate that family-focused housing supports may be more lasting and/or better coordinated post-exit.

For households experiencing homelessness for the first time, the likelihood of returning from unknown destinations increases over time. Sixteen percent returned within 6 months, rising to 29% within 12 months and 38% within 12–24 months.

PLACEMENT PATTERNS ACROSS HOUSING INTERVENTIONS

Outcomes by Housing Intervention from Stella P

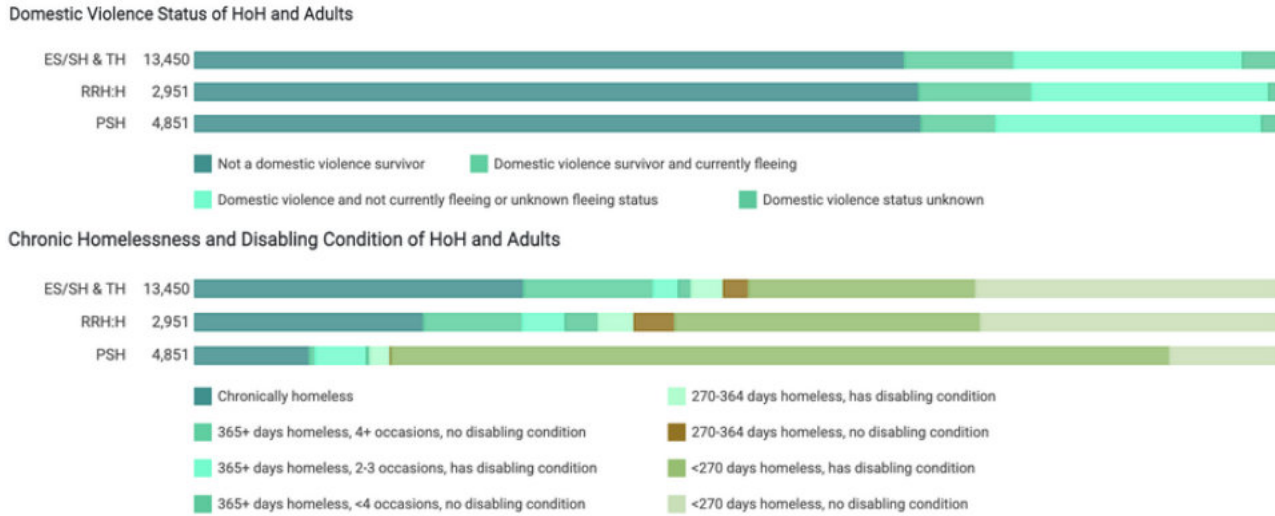


Figure 9.
Source: Stella P

Figure 9. Outcomes by Housing Intervention from Stella P
Source: Stella P

The Outcomes by Housing Intervention from Stella P Graph illustrates which household types appear in different housing interventions based on Stella P data.

Permanent Supportive Housing contains a large share of chronically homeless individuals and those with long durations of being unhoused plus disabling conditions. This indicates these clients require sustained, intensive services (case management, health and behavioral supports) rather than short-term stabilization. The largest subgroup in this population are folks who have been unhoused for <270 days and have a disabling condition. This indicates that these clients require sustained and intensive services, including case management and health and behavioral supports.

This data also shows that most households in Stella P (which does not include outreach or coordinated entry data) are not DV survivors. For households that are DV survivors and are currently fleeing a DV situation, and those who are not fleeing DV are fairly evenly spread across all housing interventions, but are the most prevalent in emergency/transitional and rapid-rehousing programs. This and the elevated rates of return to homelessness for DV survivors, point to the need for trauma-informed safety/legal planning for longer after a household moves into housing.

Section V — Qualitative Insights from Listening & Story-Sharing Circles

This section summarizes the qualitative insights³ gathered from three listening and story-sharing circles held with the Community Voices Group, the Lived Experience Collaborative (LEC), and the Youth Action Board (YAB). These sessions were designed to provide space for people who have interacted with the homelessness response system to describe, in their own words, what navigating the system feels like, and the conditions that shape their ability to access services, housing, stability, and safety.

Because this gaps analysis was conducted on a compressed timeline, the themes summarized below represent an initial snapshot of the wisdom shared. They should be further expanded and integrated into the ongoing 2026 system design and planning process.

About the Listening and Story-Sharing Circles

Four sessions were conducted in November 2025 as part of this gaps analysis:

- **Maricopa Regional Continuum of Care Lived Experience Collaborative (LEC)**
November 17 and November 24, 2025. The LEC is primarily composed of individuals who are no longer experiencing homelessness but have lived through it. Many LEC members now work within the homelessness response system, bringing both personal experience and professional insight.
- **Maricopa Regional Continuum of Care Youth Action Board (YAB)**
November 19, 2025. YAB members include a mix of youth who are currently and formerly experiencing homelessness, many of whom hold jobs outside the homelessness response system.
- **Community Voices Group Hosted at the Keys Campus and Facilitated by the Action Nexus**
November 25, 2025. Community Voices participants are primarily individuals who are currently experiencing homelessness and actively navigating the system.

While similar themes emerged across all three groups, the insights from each are presented separately below. Each group represents a distinct vantage point — a different stage of interaction with the homelessness response system and a different relationship to it — and the nuances of each perspective are important to understanding the full picture.

³ Many national bodies including HUD and USICH, have recommended structured engagement of individuals with lived experience to improve system design, strengthen service quality, and ensure alignment with community needs. U.S. Interagency Council on Homelessness. "Engaging People with Lived Experience." https://www.usich.gov/resources/uploads/asset_library/Engaging_People_Experiencing_Homelessness.pdf

COMMON EXPERIENCES ACROSS LISTENING AND STORY-SHARING CIRCLES

Across the Community Voices Group, LEC, and YAB, participants described homelessness as an ongoing state of work and vigilance. People spoke of managing documentation, transportation, rules, appointments, long waits, and unpredictable environments. The emotional labor of retelling traumatic stories, navigating multiple providers, and managing unclear or shifting expectations was a consistent theme.

Participants often described a system that feels cyclical where progress can be interrupted by one missing referral, one change in policy, or one unclear next step, sending them “back to square one.” This cycle creates exhaustion and contributes to a sense that stability is difficult to maintain.

People also described wide variation in service experiences across programs, which creates confusion and uncertainty. Differences in provider expectations, rules, communication styles, and case management approaches mean that individuals must continually relearn system requirements.

INSIGHTS FROM COMMUNITY VOICES GROUP

Community Voices Group described homelessness as shaped by constant negotiation of safety, access, and emotional endurance. Several themes emerged:

- **Trust is fragile, and staff presence shapes what can be shared.**
Participants said that having no program staff in the room allowed them to speak openly. This highlighted the fragile trust and the emotional cost of feeling watched or judged while sharing their experiences.
- **Experiences feel cyclical, with no “save point”.**
Community Voices group members described doing everything required, from working through recovery programs, gathering documents, securing employment only to be set back by barriers such as eligibility rules or missing referrals.
- **People frequently lose housing and return to shelter.**
Participants shared recurring experiences of people receiving housing vouchers, moving into a unit, experiencing a medical or personal crisis, and then returning to homelessness. They described a lack of stabilization support for seniors and medically fragile people.
- **Staff culture has a deep impact on emotional well-being.**
People were impacted by behavior that included inconsistent rule enforcement, withholding of basic items, and interactions that felt provoking or dismissive.
- **Homelessness often follows trauma or life-altering events.**
Community Voices group members described entering homelessness after domestic violence, stalking, medical crises, unemployment, or the loss of family support.

System Design Gaps Identified by Community Voices Group:

- Transitional periods are among the most challenging.

- Provider fragmentation creates confusion.
- Employment seekers face significant barriers.
- Cultural and emotional needs often go unsupported.

Participants named concrete priorities such as strengthening compassionate staff practices, building stabilization safety nets, creating clearer policy alignment between providers and pathways to housing, and improving employment supports.

INSIGHTS FROM THE YOUTH ACTION BOARD (YAB)

YAB participants described unique challenges tied to youth homelessness, including:

- Youth shared that safety includes both physical and emotional dimensions. Environments that feel unpredictable, or staff interactions that feel rushed or dismissive, increase stress.
- Youth highlighted challenges such as navigating online-only applications, accessing computers or Wi-Fi, and meeting documentation requirements that often feel overwhelming or duplicative.
- Transportation was described as a major barrier, affecting access to appointments, services, and employment.
- Youth from mixed-status or immigrant families described fear of sharing personal information due to concerns about safety and confidentiality.
- YAB members described systems built without youth in mind, leading to challenges in understanding rules, connecting to services, and advocating for their needs.

Youth-Identified Priorities:

- Visible, accessible, youth-dedicated spaces
- Lower documentation burdens
- Supportive relationships with staff
- Clearer communication of expectations
- Opportunities to repurpose unused buildings into youth housing.

INSIGHTS FROM THE LIVED EXPERIENCE COLLABORATIVE (LEC)

- LEC participants described the emotional, structural, and cultural realities of homelessness with depth and clarity:
- Participants highlighted policies and practices that create barriers or harm, including rules that are rigid, unclear, or inconsistent.
- LEC members emphasized the emotional cost of repeatedly sharing trauma, completing duplicative paperwork, and navigating bureaucratic processes.
- Participants described homelessness not as a static condition but as continuous work navigating

service deserts, managing mobility, and adapting to daily unpredictability.

- Some participants shared feeling “hopeless,” both during their homelessness and in the present, though they also expressed hope for others following behind them.
- Fear around data sharing was especially pronounced among immigrants, mixed-status households, undocumented youth, and survivors of domestic violence.
- LEC members described long waits, shifting eligibility, and lack of updates as destabilizing. They emphasized that delays create real suffering.

LEC-Identified Priorities:

- Clear accountability for timelines and processes
- Trauma-informed data practices
- Faster movement through the housing pipeline
- Co-designing solutions with lived experience communities
- Ending practices such as gatekeeping for housing solutions through documentation and duplicative assessments.

Across the circles, participants expressed a desire for clearer communication, consistent information, predictable timelines, and a more stable and straightforward pathway from homelessness to housing.

CROSS-CUTTING THEMES EMERGING ACROSS ALL LISTENING AND STORY-SHARING CIRCLES

Several consistent themes rise across the Community Voices group, YAB, and LEC:

- **Communication Matters**
Unclear or inconsistent information shapes people’s experience of the entire system.
- **Documentation is Burdensome**
Repeated requests for the same documents slow progress.
- **Transitions are Fragile**
People often lose momentum during handoffs or after housing placement.
- **Rules Vary Widely**
Differing program requirements create confusion and stress.
- **Emotional Safety is Critical**
Staff behavior and environment shape whether people feel able to ask for help.
- **Navigation is Complex**
Transportation, technology access, and wait times affect every step.
- **People Want to Be Partners**
Participants expressed a desire to help design clearer and more effective processes within the homeless response system.

Section VI — Identified System Gaps

The combined quantitative and qualitative information surfaces several consistent gaps across the Maricopa Regional Continuum of Care. These gaps appear across system access points, service pathways, program operations, documentation processes, communication practices, and transitions between interventions. The following gaps reflect the patterns documented in the system-wide data and the lived experience insights gathered through the listening and story-sharing circles.

CAPACITY GAPS

- **Shelter and Crisis Response Capacity**

Listening and story-sharing circle participants described emergency shelter environments as unpredictable, crowded, and emotionally demanding. Individuals reported difficulty sleeping, heightened stress, and limited access to clinical support during crises. These conditions contribute to emotional strain and inconsistent engagement with next steps.

- **Transitional and Bridge Supports**

Community Voices Group and LEC participants described fragile transition periods, particularly when moving between shelters, programs, or housing steps. People who had achieved significant progress; completing recovery programs, obtaining documents, or securing employment shared that a single barrier like a missing referral, eligibility rule, or delayed appointment could abruptly disrupt their trajectory towards stable housing and supports.

- **Permanent Housing Capacity Relative to Inflow**

Quantitative data show that permanent housing placements remain steady, while inflow of newly unhoused individuals remains consistent. The number of individuals exiting to inactive status is significantly higher than those placed into housing, indicating limited capacity to meet the full level of need.

- **Specialized Capacity for Older Adults, DV Survivors, and Disability-Affected Households**

Several groups experience longer episodes unhoused and have higher return rates after housing. Participants described unmet needs for stabilization supports, medical and behavioral health connections, and safety planning that lasts beyond initial placement.

NAVIGATION AND ACCESS GAPS

- **Documentation and Repetition Burdens**

LEC, Community Voices Group, and YAB participants consistently reported being required to retell their stories multiple times and complete repetitive paperwork across different providers. Repeating traumatic histories was described as emotionally exhausting and destabilizing.

- **Difficulty Accessing Services Across Locations**

Youth participants shared that transportation constraints make it difficult to access appointments, interviews, or services. Adults described challenges navigating large geographic

distances, especially when providers operate with differing hours, expectations, or entry processes.

- **Variation in Program Rules**

Across listening and story-sharing circles, participants described that rules differ significantly from one program to another. What is acceptable behavior in one location may be discouraged or punished in another, contributing to confusion about expectations and inconsistent progress toward housing.

- **Limited Technology and Resource Access**

Participants reported difficulty accessing Wi-Fi, computers, and printing resources. Youth described challenges with online-only applications or uploading résumés. Individuals seeking employment reported barriers such as lack of clean clothes, storage, and transportation assistance.

SYSTEM FLOW GAPS

- **High Levels of Inactive Exits**

Data shows that 1,000–1,500 individuals exit to “inactive” status each month, far exceeding the number of people placed into permanent housing. Participants across sessions described losing contact with providers due to long waits, unclear next steps, and difficulty re-engaging after missed appointments.

- **Long Lengths of Time Unhoused for Specific Groups**

Data show that older adults, disability-affected households, and DV-affected households experience longer-than-average durations of homelessness based on both HMIS and self-reported data. These extended durations suggest gaps in connection to services, stabilization supports, or timely placement pathways.

- **Bottlenecks in Movement Through the Housing Pipeline**

LEC participants described long waits for housing appointments, shifts in eligibility, and delays in communication that create prolonged instability. Several referenced challenges with limited coordination between housing providers and public housing authorities, particularly regarding “Move On” opportunities.

- **Fragility After Housing Placement**

Data show notable return rates from permanent housing destinations and from unknown exit destinations, particularly among older adults, disability-affected households, and DV survivors. Listening and story-sharing circle participants described losing housing due to medical crises, lack of follow-up care, or difficulty navigating requirements after move-in.

WORKFORCE AND SERVICE DELIVERY GAPS

- **Variability in Staff Practices**

Community Voices Group, YAB and LEC participants described staff behaviors that affected

their emotional safety, including inconsistent rule enforcement, unclear communication, or interactions that felt dismissive. Participants requested increased compassion, respect, and predictability across staff roles.

- **Limited Staff Capacity for Stabilization and Support**

Across sessions, participants noted that staff were often stretched thin, difficult to contact, or unable to provide updates on next steps. This aligns with system flow data showing long periods of inactivity and delays in movement between service stages.

- **Need for Consistent Training and Standards**

Participants expressed the need for shared standards across providers, including expectations for communication, documentation practices, timelines, and follow-up. The desire for clearer alignment across the system was repeated across Community Voices Group, LEC, and YAB conversations.

DATA SHARING AND COORDINATION GAPS

- **Fear of Data Sharing and Safety Concerns**

LEC and YAB participants described significant fear around sharing personal information, particularly among immigrants, mixed-status households, undocumented youth, and individuals with histories of violence. This fear affects willingness to engage with services or complete assessments.

- **Variability in Data Practices Across Providers**

Across the circles, people described providing the same information multiple times and encountering conflicting data requirements. Duplicative assessments were experienced as burdensome and contributed to delays in accessing services or housing.

- **Limited Coordination Between Agencies**

Circle participants described situations where providers did not share consistent expectations, clear documentation requirements, or coordinated timelines. Participants noted that limited coordination between housing programs, public housing authorities, and service providers contributes to delays in movement through the system.

COMMUNICATION AND TRANSPARENCY GAPS

- **Unclear or Infrequent Updates**

Participants across all circles described long periods without updates on their housing applications, case status, or next steps. This lack of communication created uncertainty, stress, and erosion of trust.

- **Lack of Plain-Language Explanations**

LEC, Community Voices Group, and YAB members emphasized the need for simple descriptions of processes, eligibility, program rules, and timelines. People expressed that unclear or overly technical language makes it difficult to understand what is required or to remain engaged

through long processes.

- **Limited Predictability in Timelines**

Participants described the challenge of not knowing how long it will take to move from shelter to assessment, from assessment to appointment, or from placement approval to move-in. This unpredictability affects stability and contributes to returns to homelessness.

Section VII — Recommendations

The quantitative data and qualitative insights reveal several opportunities to strengthen the Maricopa Regional Continuum of Care’s system performance, coordination, and service experience. The following recommendations are offered as starting points for discussion and planning. They build on the region’s demonstrated commitment to evidence-informed housing practices, the consistency of system flow patterns, and the wisdom offered through the listening and story-sharing circles. Each is intended to be operational, actionable, and aligned with emerging federal guidance while building on the approaches that have historically contributed to positive outcomes.

REINFORCE EVIDENCE-INFORMED HOUSING PRACTICES ACROSS ALL PROGRAM TYPES

The CoC’s established low-barrier housing practices have contributed to system effectiveness over nearly two decades. There is opportunity to build on this foundation while ensuring greater consistency across program types, which can improve housing stability, reduce returns, and support more efficient system flow.

Recommendations include:

- **Reduce Administrative Barriers**
Simplify documentation requirements where possible, minimize repeated requests for the same information, and ensure that people do not need to retell their stories multiple times across programs. The CoC is already underway towards this, by rolling out a new streamlined assessment tool during 2025. This tool, the Maricopa Assessment and Prioritization (MAP) tool, should help to reduce administrative barriers. This will need to be reassessed after MAP has been implemented for longer.
- **Support Immediate Pathways to Housing**
Develop clearer and more predictable steps from shelter and outreach into housing interventions, reducing unnecessary delays in assessment or eligibility determination.
- **Expand Post-Housing Stabilization Supports**
Given the return patterns identified in the data, strengthen follow-up and short-term stabilization supports, particularly for older adults, disability-affected households, and domestic violence-affected households.
- **Reinforce Low-Barrier Entry Practices**
Align provider expectations to ensure consistent access to services regardless of location or program model.

EXPAND ACCESS TO TREATMENT, RECOVERY, AND CLINICAL SUPPORTS

There is opportunity to increase access to behavioral health and recovery supports across the

system.

Recommendations include:

- **Strengthen Behavioral Health Partnerships**
Expand collaboration with behavioral health providers to increase access to treatment, assessment, and recovery services for people seeking help.
- **Integrate Clinical Support in High-Need Environments**
Participants described limited access to clinical support in shelters. Increasing availability through partnerships, co-location, or mobile teams may help stabilize crisis environments.
- **Improve Warm Handoffs to Treatment**
Establish protocols that support consistent follow-through from outreach or shelter to behavioral health and recovery appointments, reducing missed connections.

IMPROVE SYSTEM FLOW AND REDUCE LENGTHS OF TIME UNHOUSED

The quantitative data highlights several areas where the flow from homelessness to permanent housing can be strengthened.

- **Streamline Assessments and Documentation**
Reduce duplication across assessments and ensure that documentation is collected once and shared appropriately across providers.
- **Improve Coordination of Appointments and Transitions**
Long waits for appointments or movement between programs were frequently described as destabilizing. Clarifying timelines and improving scheduling can support engagement. There is an opportunity for greater integration with AHCCCS's closed loop referral system Community Cares to address this.
- **Strengthen "Move On" Pathways**
Participants described the limited ability to implement Move On strategies due to PHA capacity and limited unit/voucher availability. Continuing to build common goals and shared discussions in supporting PHA's to expand capacity and availability where possible could lend towards throughput and free up needed units.
- **Build Clear Steps in the Housing Pipeline**
Developing a simple, consistent sequence of steps, from engagement to move-in, can reduce confusion and support progress.

ENHANCE WORKFORCE ALIGNMENT, TRAINING, AND SUPPORT

Listening and story-sharing circle participants described staff interactions as central to their emotional safety and their ability to engage effectively with the system.

- **Create Shared Service and Training Expectations Across Providers**
Develop a common set of expectations for communication, timelines, documentation practices, and follow-up. Establish CoC-wide training on cultural responsiveness, trauma-informed care, and housing-focused case management practices that emphasize low-barrier engagement and individualized support.
- **Strengthen Staff Training on Communication and Predictability**
Focus on clear, consistent communication, plain-language explanations, and supportive interactions that reduce confusion and emotional strain.
- **Increase Workforce Capacity for Stabilization Support**
Expand roles or teams focused specifically on stabilization during transitions, crises, or periods of high vulnerability.

IMPROVE NAVIGATION, ACCESS, AND PRACTICAL SUPPORTS

Participants across sessions described barriers that make it difficult to access and stay connected to services:

- Expand availability of computers, Wi-Fi, printing, and application support to help people complete employment, housing, and benefits tasks.
- Transportation challenges affect access to appointments, interviews, and services. Increasing transit passes or shuttle options can improve engagement.
- Participants emphasized the need for simple explanations of processes, rules, and timelines.
- Reduce variation in program rules so people do not have to relearn expectations across each service location.

STRENGTHEN COORDINATION, DATA PRACTICES, AND SAFETY IN INFORMATION SHARING

- **Streamline Data Entry and Reduce Duplicate Requests**
Participants described being asked to provide the same information multiple times across different systems, creating unnecessary burden. Strengthening data sharing practices could significantly reduce this strain. One key opportunity is the statewide HMIS data warehouse, DWEL, which is now fully operational and beginning to integrate additional systems. While the CoC already holds a seat on the DWEL board and helps inform its direction, there is an opportunity for the CoC to play a more active role in supporting DWEL's expansion to additional systems and partners. This could include developing targeted training so CoC staff, board members, and committee members can serve as informed ambassadors—understanding how organizations join DWEL and effectively communicating its value to other systems and providers. Additional opportunity exists to improve integration with AHCCCS's closed-loop referral platform, Community Cares, particularly as the CoC prepares to transition to a new HMIS provider in 2026. Intentional coordination during this transition could help align HMIS and

Community Cares and reduce duplicative data entry while strengthening cross-system referrals.

- **Develop Trauma-Responsive Data Collection Practices**

This includes minimizing repeated storytelling and ensuring people know why information is being collected.

- **Clarify Data-Sharing Protocols to Reduce Fear**

Participants from mixed-status and immigrant households expressed concern about how their personal information might be used. Providing clear, consistent explanations about confidentiality and data use can help build trust and improve engagement. There is also an opportunity to strengthen language accessibility by establishing standards to ensure program materials are available in languages beyond English.

- **Increase Coordination and Strengthen Partnerships Between Providers and PHAs**

Stronger coordination can reduce wait times, support smoother transitions, and improve flow through the housing pipeline.

CONSIDER A UNIVERSAL-GOALS APPROACH WITH TAILORED STRATEGIES

One planning model worth considering as the CoC moves into deeper system design is an approach commonly referred to as Targeted Universalism.⁴ This framework establishes universal goals for a system or population and then develops tailored strategies for different groups based on their distinct circumstances. Unlike uniform approaches, it recognizes that different pathways may be required to achieve shared outcomes. For the Maricopa Regional CoC, this could look like:

Set CoC-Wide Universal Goals These might include:

- Reducing length of time homeless
- Increasing exits to permanent housing
- Reducing returns after housing
- Decreasing exits to inactive status

Develop Tailored Strategies for Household Types or Service Pathways While goals remain universal, strategies may differ based on distinct patterns observed in the data. For example:

- Older adults experiencing long durations unhoused
- Households returning from inactive status
- DV-affected households with higher return rates
- Youth navigating documentation and transportation challenges

This approach maintains compliance by focusing on household types, system pathways, and performance patterns, not demographic categories.

USE HUMAN-CENTERED COMMUNITY DESIGN TO CO-DESIGN

SYSTEM IMPROVEMENTS

Human-Centered Community Design (HCCD) provides a structured method for developing solutions in partnership with people who use the system. The listening and story-sharing circles demonstrated that individuals with lived experience have clear insights into what works and what creates unnecessary hardship. Recommendations include:

- **Co-Design Navigation Improvements**
Use design sessions with community members to map clearer steps, reduce administrative burden, and improve the experience of accessing services.
- **Co-Design Communication Templates and Scripts**
Develop plain-language guides, consistent updates, and shared timelines in collaboration with people who have navigated the system.
- **Co-Design Stabilization Supports After Housing**
Use HCCD methods to identify the simplest and most effective forms of follow-up that reduce returns.
- **Integrate Community Voices Throughout Future Strategic Planning and System Design**
Maintain a regular cadence of engagement through design labs, prototype testing, and feedback cycles.

These recommendations reflect the patterns evident in the data and the insights offered directly by individuals who have interacted with the homelessness response system.

Taken together, these recommendations outline possible directions for strengthening coordination, improving system flow, and deepening predictability across the homeless response system. They are intended to inform the region's planning process as it considers how to build on the patterns identified in this analysis.

⁴Targeted Universalism is a policy and planning approach originally developed by the Othering & Belonging Institute at the University of California, Berkeley. It provides step-by-step guidance for identifying universal goals, assessing current outcomes, and designing tailored strategies to close gaps. Othering & Belonging Institute. "Targeted Universalism Primer." University of California, Berkeley. <https://belonging.berkeley.edu/targeted-universalism>

Section VIII — Future Direction and Priorities for 2026 and Beyond

This gaps analysis offers a snapshot of the current conditions shaping the Maricopa Regional Continuum of Care. It reflects a system that is operating with commitment, consistency, and a strong foundation in housing-centered, client-driven practices—yet one that faces significant strain from steady inflow, limited outflow growth, and complex service demands. As the CoC prepares for the next phase of planning in 2026, the patterns identified throughout this document provide a starting point for deeper exploration, and the directions outlined below represent areas the CoC may wish to consider as it shapes its path forward.

A YEAR FOR DEEPER SYSTEM ANALYSIS AND DESIGN

The accelerated timeline of this gaps analysis means that 2026 could be an important period for expanding the analysis, adding depth where the compressed process allowed only snapshots, and exploring the structures that could support long-term system improvement. This might include developing richer data analyses, conducting additional listening and design sessions, and exploring program models that respond to the gaps identified by households and service providers.

ESTABLISHING UNIVERSAL SYSTEM GOALS

One direction the CoC could explore is establishing clear universal goals that apply to all households interacting with the system. These goals might include:

- Reducing length of time homeless
- Increasing exits to permanent housing
- Decreasing returns after housing
- Reducing exits to inactive status
- Strengthening post-housing stabilization

Goals like these could provide shared direction across providers, program types, and jurisdictions. They could also create a foundation from which tailored strategies might be developed to address the distinct patterns identified in this gaps analysis, such as long durations unhoused for older adults, high inactive exits across the system, or administrative challenges that slow progress through the housing pipeline.

DEVELOPING TAILORED STRATEGIES FOR DISTINCT HOUSEHOLD PATTERNS

The data and listening circles highlight clear variations in how different household types navigate the system. If the CoC pursues a universal-goals approach, tailored strategies — distinct from

demographic strategies and fully compliant with federal requirements — could be developed based on patterns such as:

- Households returning from inactive status
- Individuals experiencing long episodes of homelessness
- Domestic violence-affected households experiencing elevated return rates
- Youth navigating documentation, transportation, and technology challenges
- Older adults and disability-affected households experiencing extended self-reported episodes

Strategies like these could support shared goals and strengthen system responsiveness.

USING HUMAN-CENTERED COMMUNITY DESIGN TO CO-CREATE SOLUTIONS

Another direction worth considering is continued use of Human-Centered Community Design (HCCD)⁵ methods to shape system improvements. The listening and story-sharing circles revealed not only the challenges households face, but also the clarity and insight with which people described practical solutions. HCCD offers a structured way to collaborate with community members to:

- Reduce documentation burdens
- Improve communication and transparency
- Clarify pathways from crisis to housing
- Strengthen stabilization supports after placement
- Create youth-friendly access points
- Increase predictability in transitions and appointments

Through iterative design, prototyping, and community feedback, the CoC can build a more consistent, navigable, and supportive system.

EXPANDING COORDINATION ACROSS THE HOUSING PIPELINE

2026 provides an opportunity to strengthen relationships across service providers, housing programs, behavioral health partners, and public housing authorities. Improving coordination can reduce bottlenecks, speed up transitions, and support more effective Move On pathways. Enhanced coordination can also improve data practices, reduce duplicative assessments, and promote shared communication standards across the system.

⁵ Human-Centered Design is used globally across disciplines such as health care, social services, public systems, and technology to improve service experiences by centering user needs and feedback. IDEO.org. "Human-Centered Design Overview." <https://www.ideo.org/tools>

STRENGTHENING WORKFORCE CAPACITY AND CONSISTENCY

Listening and story-sharing circle participants described provider and CoC staff as central to their experience of the system. Strengthening workforce alignment — including communication, predictability, and shared expectations — could meaningfully improve engagement and stability. Supporting staff with clear standards, training, and aligned practices across organizations would help build a more uniform experience for households navigating homelessness.

ALIGNING SYSTEM IMPROVEMENTS WITH HUD NOFO PRIORITIES

As the CoC considers its future direction, alignment with emerging federal priorities — while continuing to apply the evidence-informed housing practices that have contributed to positive system outcomes — will be an important area to explore. This could include:

- Strengthening treatment and recovery access
- Ensuring required services are available and accessible
- Maintaining low-barrier access to housing
- Supporting transitions with stabilization resources

This alignment positions the region to be competitive in future funding cycles while continuing to build approaches that reflect local needs and lived experience.

EMBEDDING COMMUNITY VOICE THROUGHOUT 2026

This gaps analysis demonstrates that people with lived experience bring insight into the system's challenges and solutions that cannot be derived from data alone. In 2026, the CoC could consider expanding engagement through:

- Additional listening and story-sharing circles
- System Design labs and workshops
- Prototype testing
- Peer-led conversations
- Co-creation of communication tools, timelines, and navigational supports.

Sustained engagement will strengthen system design and support solutions that reflect real needs and real experiences.

The future represents an opportunity to build on this snapshot, deepen understanding, and explore how the system might become more navigable, more coordinated, and more grounded in the realities described by people who rely on it. Directions such as strengthening evidence-informed housing practices, exploring universal system goals, developing tailored strategies for distinct household patterns, and using Human-Centered Community Design to co-shape solutions could help the

Maricopa Regional Continuum of Care move toward a homelessness response system that meets people with the predictability, coordination, and stability they consistently described as essential.

This gaps analysis reflects a system operating with dedication and a clear commitment to meeting the growing needs of the community. The insights shared here, drawn from both quantitative patterns and lived experience, offer a grounded starting point for future conversations about strengthening the system. With collaborative design, aligned goals, and a continued commitment to evidence-informed housing practices, the region is well-positioned to explore how to build a more navigable, coordinated, and stabilizing homelessness response system for all who rely on it.